| · | | | ٧ |
|--|-----------------------------------|--|---|
| ARIZONA STATE BO | DARD OF HEALTH | State File No | 168 |
| PLACE OF BIRTH 🚙 | BUREAU OF VITAL STATISTICS | | |
| STANDARD CERTIF | STANDARD CERTIFICATE OF BIRTH | | |
| ounty May | State (Lill) | ona | ********** |
| Pistrict or Township. | or Village | | |
| ity No. 7// A | Timo Oak - | — _ G4 | |
| (If birth occurred in | n a hospital or institution, give | | |
| Pull name of child (da lotto Muño) | | If child is not y | ret named, make |
| Sex of Child To be answered ONLY 4. Twin, triplet of other | | | |
| in event of plural births. | 24.7x | 7. Date of birth Mar. | 2.29. |
| 1 | 1 | Month Da | Ay Year |
| FATHER W | 14. | MOTHER | <i>n</i> . |
| full name Coleto Muños | Full maiden name | utonia Il | eds as a. |
| . Residence | 15. Residence | | and you |
| (Usual place of abode) | (Usual place of abode | • 7/// | |
| If non-resident, give place and state. | If non-resident, give pl | ace and state. | ami |
| 0. Color or race | 16. Color or race | | |
| Western 11. Age at last birthday 3 4 (Years) | Mexica | 17. Age at last birthda | 2. F .v. |
| 4/11-1 | - Freezeway | allina | /(10a1) |
| 2. Birthplace (city or place) | 18. Birthplace (city or place | e) // OCCs | is. |
| (State or country) gauses TIEN | (State or country) | Mruzon | a) |
| 3. Occupation | 19. Occupation | | |
| Nature of industry | Nature of industry | 1. 1 | |
| 771351300 | 2 | Jomes Rea | Adam Or |
| 0. Number of children of this mother | | 21. Were precautions tak | on against son- |
| | it now dead | thalmia neonatorum/ | 0 |
| CERTIFICATE OF ATTENDE | | P * | |
| | om alive | 230 Pm. on the | data shove stated |
| (E * When there was no attending physician) | lorn alive or stillborn) | | |
| or midwife, then the father, householder, Signature | 1 /- M | 7 | ******************************* |
| child is one that neither breathes nor shows other evidence of life after birth. | olelo III | uno3 | |
| Given name added from | Father / | (Physician or midwife) | * |
| supplemental report Month, day, year | II A. LIVE U | an ar | *************************************** |
| Filed 3. 1 | 5 . 19.29 | | |
| Registrar. | e various par | ************************************** | Registrar. |
| 3.26.29 149-312-1 | | | |